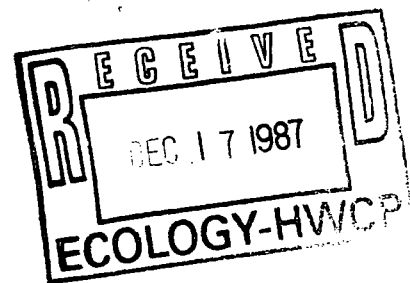


ANDREA BEATTY RINIKER  
Director



UMCSF

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STATE OF WASHINGTON  
DEPARTMENT OF ECOLOGY

4350-150th Ave. N.E. • Redmond, Washington 98052-5301 • (206) 867-7000

December 15, 1987

JAN 27 1988  
Superfund Branch

TO: Michael J. Spencer, Hazardous Waste, Woodland Square  
FROM: Gail Colburn, Ecology, NWRO  
SUBJECT: Universal Manufacturing Company Site,  
Woodinville, Washington

Thank you for your transmittal of the site inspection report (PA/SI) for the above facility.

The Northwest Regional Office has the following comments to make:

1. Further investigation should include a down gradient water quality sampling/investigation near the drainfield area, and soil samples at depth. As wells are drilled, split-spoon samplers should be used to obtain soils samples at depth. Depth samples should be taken at the estimated elevations at which the drainfield leaches, and slightly above and below. Water sampling techniques should be such that allow obtaining both a "floating" sample and a sample at depth to check for "sinkers".

Acetone is a "floater", Methylene Chloride and Trichloroethylene are both "sinkers." Metals and cyanide should be included as wells as base neutral/acids analysis, as there are many acid and alkaline "dip tanks" used in the metals plating business.

2. Item number one should also be undertaken to assess the old waste lagoon, even if this entails drilling of wells in a parking lot or sending a boring down through the slab in the process building.

These items should be undertaken by the company, if possible, under RCRA monitoring requirements. Reviewers of this document included Ron Devitt, Norm Peck and Gail Colburn. Should you have any questions, please feel free to call any of us.

GCC:gm

USEPA SF



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INVENTORY-POSSIBLE SOURCES OF HAZARDOUS WASTE

\*\*\*\*\*

EPA NUMBER: \_\_\_\_\_ NPDES#: \_\_\_\_\_  
 SIC CODE BEG: 3679 SIC CODE END: \_\_\_\_\_ BASIN CODE: \_\_\_\_\_  
 STATE: Wa. COUNTY: King CO CODE: \_\_\_\_\_

NAME: Universal Manufacturing Corp.  
 OWNER: \_\_\_\_\_  
 ADDRESS: 144th N.E. 190th, Woodenville ZIP: 98072  
 CONTACT: \_\_\_\_\_ PHONE: \_\_\_\_\_

LOCATION: \_\_\_\_\_  
 TOWNSHIP: \_\_\_\_\_ RANGE: \_\_\_\_\_ SECTION: \_\_\_\_\_  
 USGS MAP NAME: \_\_\_\_\_

BUSINESS TYPE  
Mfg. printed circuit board  
 WASTE TYPES  
Metal salt solutions  
 DISPOSAL ACTIVITIES  
Disposal company  
 PERIOD OF OPERATION: \_\_\_\_\_

HISTORY OF SITE OR PLANT OPERATION

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

DETAILS OF WASTE CHARACTERISTICS, VOLUMES AND DISPOSAL OPERATION

10,000 gallons per month of concentrated metal salt and etching solution is generated.  
Waste is picked up for disposal by liquid waste disposal company.

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

SIC CODES

2679 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

# INVENTORY-POSSIBLE SOURCES OF HAZARDOUS WASTE

\*\*\*\*\*

EPA NUMBER: \_\_\_\_\_

## WASTE CHARACTERISTICS

IGNITABLE: _____		SOLID: _____
CORROSIVE: _____	RADIOACTIVE: _____	SEMI-SOLID: _____
REACTIVE: _____	INFECTIOUS: _____	LIQUID: _____
TOXIC: _____	OTHER: _____	GASEOUS: _____

## TOTAL WASTE QUANTITIES

VERY LARGE AMOUNT: _____		COUNTED: _____
LARGE AMOUNT: <input checked="" type="checkbox"/> _____	AMOUNT OF WASTE	ESTIMATED: _____
SMALL AMOUNT: _____	<i>10,000 gal/mo.</i>	REPORTED: <input checked="" type="checkbox"/> _____
VERY SMALL AMOUNT: _____	TONS, YDS, BBL, ETC	MEASURED: _____

## WASTE DISPOSAL

REGULATORY CONTROLS: \_\_\_\_\_

WASTE TRANSPORTED TO SITES #: \_\_\_\_\_

WASTE DISPOSED INTO SEWER SYSTEM: \_\_\_\_\_

WASTE DISPOSED IN EFFLUENT: \_\_\_\_\_

WASTE DISPOSED OF ON SITE: \_\_\_\_\_

## ON SITE DISPOSAL

INCINERATION: _____	LAND SPREADING: _____
SURFACE STORAGE: _____	BURIAL: _____
WELL INJECTION: _____	OTHER: _____

## SITE CONDITIONS

GEOLOGIC SETTING

\_\_\_\_\_

\_\_\_\_\_

HYDROLOGIC CONDITIONS

\_\_\_\_\_

\_\_\_\_\_

DISTANCE OF LAKE OR MARINE WATER: \_\_\_\_\_

DISTANCE TO SURFACE STREAM: \_\_\_\_\_

DEPTH TO GROUNDWATER: \_\_\_\_\_

DISTANCE TO WELLS OR SPRINGS: \_\_\_\_\_

DISTANCE TO NEAREST RESIDENCE: \_\_\_\_\_

USE OF SITE IF ABANDONED: \_\_\_\_\_

## PHYSICAL CONTROLS AT SITE

SOURCES OF INFORMATION: *Battelle Report*

COMPILER: \_\_\_\_\_ DATE: \_\_\_\_\_